DATE	11-9-07	Paper No.:			
DAIL					
TO SPE OF	: Technology Center	134 10/815092			
SUBJECT	: Request for Certificate of Corr	ection on Patent No.: 7231668 B2			
A response is requested with respect to the accompanying request for a certificate of correction.					
Please comp	olete this form and return wi	th file, within 7 days to:			
Palm location 7580 , Certificates of Correction Branch – South Tower – 9A22 If response is for an IFW, return to employee (named below) via PUBSCofC Team in MADRAS. With respect to the change(s) requested, correcting Office and/or Applicant's errors, should the patent read as shown in the certificate of correction (COCIN)? No new matter should be introduced, nor should the scope or meaning of the claims be changed.					
				,	Elisha Evans
			Thank You For Your Assistance		Certificates of Correction Branch
•		Tel. No. 703- 308-9390 EXT 110			
	t for iccuing the above ide				
•	on the appropriate box.	entified correction(s) is hereby:			
Note your decision	_	All changes apply.			
Note your decision	on the appropriate box.	9			
Note your decision	Approved	All changes apply.			
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.			
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.			
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.			
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.			
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.			
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.			

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